Please type a plus sign (+) inside this box - +

PTO/SB/01 (12-97)

IB-1627

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Att rn y Docket Number

DECLARATION FOR UTILITY OR **DESIGN** PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted with Initial

Filing

 □ Declaration OR Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))

required)

Tomsia, Antoni P. **First Named Inventor** COMPLETE IF KNOWN **Application Number** 09/845,597 Filing Date April 30, 2001 **Group Art Unit** 1772 **Examiner Name** Unassigned

As a below named inventor, i hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
Glass/Ceramic Coatings for Implants										
the specification of which (Title of the Invention)										
is attached hereto										
OR was filed on (MM/DD/YYYY) April 30, 2001 as United States Application Number or PCT International										
Application Number 09/845,		as amended on (MM/DD/Y		(if applicable).						
I hereby state that I have reviewed amended by any amendment spe	and understand the	contents of the above identiove.	ified specification	, including the claims, as						
I acknowledge the duty to disclos	information which is	material to patentability as	defined in 37 CF	₹ 1.56.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO						
Number(s)	Country	(MINDED/TTTT)								
Additional foreign application r	umbers are listed on a	a supplemental priority data	sheet PTO/SB/0	2B attached hereto:						
I hereby claim the benefit under	35 U.S.C. 119(e) of an	y United States provisional	application(s) list	ted below.						
Application Number(s)		e (MM/DD/YYYY)								
60/201,556)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.								
	1									

[Page 1 of 2]

Please type a plus sign (+) inside this box -> | + |

SEP 2 8 2001

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Thereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the

United States of information who	r PCT Infi ich is ma	≈a, listed below a ternational applic terial to patental international filing	ation in pility as	the mar defined	nner provid in 37 CFR	ed by the	e first oa	araorapi	h of 35 U.S.C	. 112. I a	cianowi	ledge the duty	to disclose		
U.	S. Pare	nt Application		PCT P	arent		Parent Filing Date Pa (MM/DD/YYYY)					nt Patent N if applicab			
		PCT international ereby appoint the													
and Trademark	Office co	ereby appoint the onnected therewife	th: 🔽	Custom OR	er Number	0080)76		on number list		•	Place Customer Number Bar Code Label here			
			<u> </u>	vedizie	Registrati		-1116/16	gistratio				Regis	tration		
	Name	e			Numbe	Г	\dashv		Nam	e		Nu	mber		
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.															
Direct all correspondence to: X								ress below							
Name		08076													
Address				1	PATENT TR	ADEMARK	OFFIC	E.	<u>;</u>						
Address									1						
City				ı			Sta	ate		ZIP					
Country				Те	lephone					Fax					
believed to be punishable by	true; and fine or in	Il statements ma d further that the nprisonment, or t issued thereon.	se state	ements	were mad	le with th	ie knov	wledge	that willful fa	lse state	ments	and the like s	o made are		
Name of Sc	ole or F	irst Inventor	:		. 157			petitio	n has been	filed for	this u	nsigned inve	ntor		
G	iven Nam	ne (first and mide	dle [if a	any])					Famil	y Name	or Su	rname			
Antoni P.		•	v		1.		Tor	nsia					.		
Inventor's Signature				1	Hee	u	cp					Date	8/22/01		
Residence: 0	City	Pinole			State C		Γ	ountry	United	States		Citizenship	TIC		
Post Office A	ddress	1022 Fran	cisca	Ct.											
Post Office A	ddress						_								
City		Pinole	State		0/0	ZIP	94:			Cou		United S			
X Additional	invento	rs are being na	med o	n the .	<u>Y</u> 2 supp	lementa	ıl Addi	itional l	nventor(s) s	heet(s)	PTO/S	SB/02A attac	hed hereto		

Please type a plus sign (+) inside this box ->

sign (+) inside this box

+ Approved for use through 9/30/98. OMB 0651 0782

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Na	me (first and middle [if any])					Family Nan	ne or S	Surname		
Eduardo	,			Saiz						
Inventor's Signature	Stual		_					Date	Date 8	
	Berkeley	State-	CA		ountry	United Stat	es	Citizensl	nip S	nain
Residence: City	Delikeley State Of Commy Cined States									
Post Office Address 1512 Allston Way										
Post Office Address										
City	Berkeley	State	CA	į	zip 9	4703	Country	Unite	ed St	ates
Name of Additional Joint Inventor, if any:										
Given Na	Given Name (first and middle [if any]) Family Name or Surname									
Jose M. Gomez-Vega										
Inventor's Signature								Da	te	
Residence: City	Nagoya	State			Country	Japan		Citize	nship	Spain
Post Office Address)								
Post Office Address										
City	Nagoya	State			ZIP	464-0036	Cou	ntry Ja	pan	
Name of Additio	onal Joint Inventor, if ar	ıy:			A petition	on has been file	d for th	nis unsig	ned inv	entor/
Given Na	ame (first and middle (if any	1)				Family Na	me or	Surname		
Sally J.				Mar	shall					
Inventor's Signature								Da	ite	
Residence: City	Larkspur	State	CA		Country	United Sta	ites	Citize	nship	US
Post Office Address	45 Wiltshire Ave									
Post Office Address										
City	Larkspur	State	CA		ZIP	94939		Country	Uni	ted States

Please type a plus sign (+) inside this box ->

sign (+) inside this box

+ Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

				_	- r ag						
Name of Addition	al Joint Inventor, if any	/: <u> </u>		A petition has been filed for this unsigned inventor							
Given Nan	ne (first and middle [if any])			Family Name or Surname							
Grayson W.				Marshall							
Inventor's Signature	6 royson W	1. M	1 Rol	Rel	X//\	Date	- \ 8	Inloi			
								2			
Residence: City	Larkspur	arkspur state CA country United States Citizenship US									
Post Office Address 45 Wiltshire Ave.											
Post Office Address											
	Larkspur	State	CA		ZIP 9	4939	Counti	y Unite	d Stat	es	
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any]) Family Name or Surname											
										_	
Inventor's Signature					-			Da	te		
Residence: City		State			Country			Citize	nship		
Post Office Address				-							
		***								_	
Post Office Address			T		T		Τ.				
City		State	<u></u>		ZIP		Cou	intry			
Name of Additio	nal Joint Inventor, if an	ıy:			A petiti	on has been fil	ed for 1	this unsig	ned inv	rentor	
Given Na	me (first and middle [if any])				Family Na	ame or	Surname			
	•										
Inventor's Signature								D	ate		
Residence: City	State Country Citizenship										
Post Office Address											
Post Office Address											
City		State			ZIP			Country			

Please type a plus sign (+) inside this box ->

PTO/SB/02 (2-97)

Approved for use through 9/30/98. OMB 065 1082

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE OF

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor											
Given Na	me (first and middle [if any		Family Name or Surname								
Eduardo			Sa	iz							
Inventor's Signature								Date			
Residence: City	Berkeley	State	CA	Co	ountry	United Stat	tes	Citizens	hip S	Spain	
Post Office Address											
Post Office Address											
City	Berkeley	State	CA		zip 9	4703	Country	Unit	ed St	ates	
Name of Additional Joint Inventor, if any:											
Given Name (first and middle [if any]) Family Name or Surname											
Jose M. Gomez-Vega											
Inventor's Signature	Date										
Residence: City	Nagoya	State		C	ountry	Japan		Citize	nship	Spain	
Post Office Address	Mizuno Heights 10)									
Post Office Address											
City	Nagoya	State			ZIP	464-0036	Coun	ntry Ja	ıpan		
Name of Additio	nal Joint Inventor, if a	ny:		⊐ △	petitio	n has been file	d for th	is unsigi	ned in	entor/	
Given Na	me (first and middle (if any	1)				Family Nar	me or	Surname			
Sally J.			М	ars	hall						
Inventor's Signature	Sala Marshall Date 8/							8/17/01			
Residence: City	Larkspur							US			
Post Office Address	45 Wiltshire Ave										
Post Office Address			T								
City	Larkspur	State	CA		ZIP	94939	С	ountry	Uni	ted States	

Please type a plus sign (+) inside this box



PTO/SB/02 (3-97)

Approved for use through 9/30/98. OMB 055 0032

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a containing the control purpose. valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Additional Joint Inventor, if any:										
Given Na	me (first and middle [if any	/])				Family Nan	ne or S	Surname		
Eduardo				Saiz						
Inventor's Signature								Date	,	
Residence: City	Berkeley	State	CA		Country	United Stat	es	Citizens	ship S	Spain
Post Office Address	ress 1512 Allston Way									
Post Office Address										
City	Berkeley	State	e CA		zip 9	4703	Country	/ Unit	ed S	tates
Name of Additional Joint Inventor, if any:										
Given Nar	Given Name (first and middle [if any]) Family Name or Surname									
Jose M.	Jose M. Gomez-Vega									
Inventor's Signature	M W Date 14/8								10/8/11	
Residence: City	Nagoya	State			Country	Japan		Citize	nship	Spain
Post Office Address	Mizuno Heights 10)								
Post Office Address			····•							
City	Nagoya	State	e		ZIP	464-0036	Coun	try Ja	ıpan	
Name of Addition	nal Joint Inventor, if a	ny:			A petitio	n has been filed	d for thi	is unsigi	ned inv	entor .
Given Nar	me (first and middle (if any	<u>'])</u>				Family Nam	ne or S	Sumame		
Sally J.	-			Mars	shall					
Inventor's Signature		,						Da	te	
Residence: City	Larkspur	State	CA		Country	United Stat	es	Citize	nship	US
Post Office Address	45 Wiltshire Ave									
Post Office Address										
City	Larkspur	State	CA		ZIP	94939	Co	ountry	Unit	ed States